State: NY Officer or Employing Office: State: NY Employee Amendment Daytime Telephone: (263) 235-52L5 Employee Termination Date:	— ANSWER EACH OF THESE re (e.g., salaries or reporting period? Yes X No rarticle in the Yes No X	vill. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting ves No	IX. Dic land the child purchase, sell, an out an out tule IV. In the child have any reportable land to the	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response. LUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS	Name: Kathleen Hocky	Tes No	re: (2004) 225-52LS Ing Office: Termination Termination TIONS Your spouse, or a dependent child reporting period (i.e., aggrend not otherwise exempt)? Plete and attach Schedule VI. Your spouse, or a dependent child revel or reimbursements for travel in home than \$350 from one source); plete and attach Schedule VII. I hold any reportable positions on or the current calendar year? Plete and attach Schedule VIII. Thought any reportable agreement or annitity? Plete and attach Schedule IX. The question in this part may reportable agreement or annitity? Plete and attach Schedule IX. The question in this part may reportable agreement or annitity? Plete and attach schedule attache ANSWER EACH OF rexcepted trusts need not be disclaration on Ethics.	Yes Wes Wes Wes Wes Wes Wes Wes Wes Wes W
For use by Members, officers, and employees	Hachu)	State: NY Officer or District: 14 Amendment Employee Employing Office: Described? Amendment Telephone: (1004) 235-52LS HAND DE INVERSE OF REPRESENTARY A \$200 penalty shall be against anyone who files. 30 days late. 90 days late. 10 Termination Date: against anyone who files. 11 Termination Date: against anyone who files. 12 Termination Date: against anyone who files. 13 days late. 14 \$200 penalty shall be against anyone who files. 15 Termination Date: against anyone who files. 16 Termination Date: against anyone who files. 17 Termination Date: against anyone who files. 18 Termination Date: against anyone who files. 19 Termination Date: against anyone who files. 10 Termination Date: against anyone who files. 11 Termination Date: against anyone who files. 12 Termination Date: against anyone who files. 13 Termination Date: against anyone who files. 13 Termination Date: against anyone who files. 14 Termination Date: against anyone who files. 15 Termination Date: against anyone who files. 16 Termination Date: against anyone against anyone who files. 17 Termination Date: against anyone against anyone against anyone against anyone against anyone against anyone a	State: NY District: 24 Deptime Telephone: (2ca) 235-53LS HAND DEPTINE THESE OF THE CLERK District: 24 Deptiment State: NY Difficer or District: 24 Deptiment No Difficer or Difficer or District: 24 Deptiment No Difficer or Demokrying Office: Termination Date: 30 days late. A \$200 penalty shall be against anyone who files. 30 days late. A \$200 penalty shall be against anyone who files. 30 days late. A \$200 penalty shall be against anyone who files. 30 days late. A \$200 penalty shall be against anyone who files. 30 days late. VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VII. VIII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting reportable travel or reimbursements for travel in the reporting period (i.e., aggregating more than \$350 from one source)? If yes, complete and attach Schedule VIII. VIII. Did you, hold any reportable positions on or before the date or hold any reportable positions on or before the date than 5chedule VIII. Yes, complete and attach Schedule VIII.	Daytime Telephone: (262) 235-52LS HAND DEINVER EACH OF THESE QUESTIONS - ANSWER EACH OF THESE QUESTIONS - (e.g., salaries or reporting period? Yes X No No No No Northward that yes, complete and attach Schedule VI. VII. Did you, your spouse, or a dependent child receive any than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI. VII. Did you, your spouse, or a dependent child receive any than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI. VII. Did you, your spouse, or a dependent child receive any than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI. VII. Did you, your spouse, or a dependent child receive any period (in-, aggregating more than \$350 from one source)? If yes, complete and attach Schedule VII. VII. Did you hold any reportable positions on or before the date of filing in the current calendar year? Ves X No X If you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule VII. VII. Did you have any reportable agreement or arrangement with the spouse. Ves X No X If you have any reportable agreement or arrangement with the spouse. Ves X No X If yes, complete and attach Schedule VII. Ves X No X If yes, complete and attach Schedule VII. Ves X No X If yes, complete and attach Schedule VII. Ves X No X If yes, complete and attach Schedule VII. Ves X No X If yes, complete and attach Schedule VIII.	UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	TIVES RE STATEMENT		2012 MAY 14 PH 4: 03
ANSWER EACH OF THESE QUESTIONS VI. Did you, your spouse, or a dependent child receive any reporting period? Ves	plete and attach Schedule VII. I hold any reportable positions on or before the date the current calendar year? plete and attach Schedule VIII. The plete and attach Schedule VIII. The plete and attach Schedule VIII. The question in this part must be answered and priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule to the pri	nave any reportable agreement or arrangement with nitity? Pes Diete and attach Schedule IX. h question in this part must be answered and priate schedule attached for each "Yes" respo	priate AN		\$TS—Details regarding "Qualified Blind Trusts" approved by t ded from this report details of such a trust benefiting you, you	he Committee on Ethics and ur spouse, or dependent chil	d certain other "excepted trusts" need not be discl	Yes
— ANSWER EACH OF THESE QUESTIONS In [e (e.g., salarites or eporting period?] Pes X No	plete and attach Schedule VII. I hold any reportable positions on or before the date re current calendar year? Plete and attach Schedule VIII. Tave any reportable agreement or arrangement with ritity? Indicate and attach Schedule IX. The question in this part must be answered and spriate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule attached for each "Yes" responsible to the priate schedule viii.	nave any reportable agreement or arrangement with partity? Initity? Initity? In question in this part must be answered and priate schedule attached for each "Yes" responsible to the schedule attached for each "Yes" responsi	ENT, OR TRUST INFORMATION — AN roved by the Committee on Ethics and certain other "excepte 19 you, your spouse, or dependent child?	ertain other "excepted trusts" need not be disclosed. Have you Yes	EMPTION—Have you excluded from this report any other asse y meet all three tests for exemption? Do not answer "yes" unles	ets, "unearned" income, trans ss you have first consulted w		Yes

Name
Kathleen
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Hechul

Page 2 of 6

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Keene State State of Maryland Civil War Roundtable (Oct. 2nd)	Type Approved Teaching Fee Legislative Pension Spouse Speech	Amount \$6,000 \$9,000 \$1,000
Ontario County Board of Education	Chorage Carary	NA
frie county, Bussalo, NY (income for services rendered prior to House employment	Select	434, 636
Property of Justice, Buttalo, NY	Spouse salary	₹
Met Life Distribution	Annoity	4 67 / mo

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المعالمة	oppunheimer	oppenheimer	Proph	7.0	NYS College		Examples:		homes and values who was and values and valu	For an owners that is not pubness, the naturation in Block A.	rine name or the institution walue at the end of the revalue at the end of the real properties and real provide a complete address.	ments), proments of the	I IRAs al	Provide complete name not use ticker symbols.)	than \$20	nd of th	y (a) eac yme with	Asset	
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Adelity Adv small cap	ner street fund	ner Discovery fund	Oppenheimer International Diversified fund	1948 College 529 - Vergroed 157. aand Sand Salest II Sund 25. L. Installmient tobal Stock Florket f	15/1-tal Brad Maix externed 25% installment	1st Bank of Paducah, KY Accounts	Simon & Schuster	Mega Corp. Stock	both the contraction of Schedule III requirements, please refer to the instruction of Schedule CDC), or is jointly held with your spouse (JT), in the optional column of the third of Schedule CDC), or is jointly held with your spouse (JT), in the optional column on the far left.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	rite name or the institution noting the account end its value at the end of the reporting period. For rental or other real property held for investment, provide a complete address.	me power, even if not exercised, to select the special investments), provide the value for each asset held in the account that exceeds the reporting thresholds. For retirement accounts which are not self-directed, provide only the name of the institution holding the account and its	For all IRAs and other retirement plans (such as 401(k) plans) that are self-directed (i.e., plans in which you have	Provide complete names of stocks and mutual funds (do not use ticker symbols.)	more than \$200 in "unearned" income during the year.	the end of the reporting period, and (b) any other reportable asset or sources of income which generated	Identify (a) each asset held for investment or production of income with a fair market value exceeding \$1,000 at	Asset and/or Income Source	BLOCK A
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×	×	*	<u>×</u>	3	Ž	<u> </u> _	Indefinite		\$1,001 - \$15,000		ဂ			If an asset was sold during the reporting	please specify the method used.	reporting year. It you use a valuation	Indicate value of asset at close		
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							Royalties		Other Type of Income (Specify: e.g., Partnership Income	or Farm Incon	ne)	,	gains, even if reinvested, must be disclosed as income. Check "None" if the asset generated no income dur-	may check the "Tax-Deferred" column. Dividends, interest, and capital	(such as 401(k) plans or IRAs), you	you to choose specific investments or	Check all columns that apply. For retirement accounts that do not allow		
					<u> </u>				None		_		ear	reir	the sale	, V	Def For		
	×	*	<u>×</u>	↓	 				\$1 – \$200		=		income. Check "Non earned or generated.	interest, and capital reinvested, must be	the appropriate box below. Dividends ,	ne,	ass		
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				1	 	╁	-	(0	Over \$5,000,000		×	_{_							, _
								S (partial)	or or m	follows: (S) (partial) See below for exam-	portion of an asset is sold, please	If only a	year.	\$1,000 in reporting	or exchanges (E) exceeding	(P), sales (S),	asset had	Indicate if the	BLOCK E

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

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SCHEDULE IV— TRANSACTIONS

Cathleen C. Hachul

Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property held for investment that exceeded \$1,000. Include transactions that resulted in a capital loss. Provide a brief description of any exchange trans-	resulted in a capital loss. Provide a brief description of any exchange transaction. Exclude transactions between you, your spouse or dependent children, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	SP, DC, JT Asset SP Example: Mega Corporation Common Stock (partial sale)	NYS College										A. Vice manufacture of the second of the sec
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Type of Transaction		SALE	×	×										
tion	IANGE	EXCH												
al 00	Box if Capital xceeded \$200	Check E Gain Ex												
Date	(MO/DAY/YR) or Quarterly, Monthly, or	Bi-weekly, if applicable	10-12-11	11-51-9										
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SCHEDULE VIII—POSITIONS

Name Kathleen C. Hachul

Page 6 of 6

organization, or any educational or other institution other than the United States. proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, any nonprofit organization, any labor Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner,

Exclude: Positions listed on Schedule I; positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature.

solio), and positions octory of an increase y many	
Position	Name of Organization
אונפכאסנ	Kathleen Hary House

SCHEDULE IX—AGREEMENTS

employee welfare or benefit plan maintained by a former employer. government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an Identify the date, parties to, and general terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of

Date	Parties To	Terms of Agreement